

BRATTLEBORO MEMORIAL HOSPITAL
Brattleboro, VT

History and
Physical Examination Report

CHIEF COMPLAINT:

Fever, rash, malaise, sore throat

PRIMARY CARE MD: [REDACTED]

HISTORY of PRESENT ILLNESS: Pt. had fever 6/19 & 20; felt fine 6/21 but again developed fever yesterday accompanied by sore throat, general achiness, lesions in mouth, pain w. urinating; itchy rash on back; vaginal s/c (white) & pain sticky yellow bilab. eye b/c

2 wks. ago received mult. black fly bites w. swollen glands

SOCIAL HISTORY: visiting from CT. w. husband & family
① Tob.

PAST MEDICAL HISTORY/SURGERIES

YEAR	ILLNESS/OPERATION/INJURY	YEAR	ILLNESS/OPERATION/INJURY
	He. TAH - otherwise PMHx benign		

REVIEW OF SYSTEMS/FAMILY HISTORY:

	Patient	Family	COMMENTS	Patient	Family
1) RECENT WEIGHT				16) NEUROLOGICAL	
2) MIGRAINE HEADACHES				17) ARTHRITIS	
3) EPILEPSY/CONVULSIONS				18) OSTEOPOROSIS	
4) EYE DISEASE (Other than Glasses)				19) CANCER - TYPE:	
5) HEARING DISORDER				20) BLEEDING DISORDER	
6) RECURRENT - NOSE BLEEDS SINUS/THROAT INFECT(S)				21) BLOOD TRANSFUSIONS(S)	
7) ANGINA - CHEST PAIN				22) ANEMIA	
8) HIGH BLOOD PRESSURE				23) DIABETES	
9) HIGH CHOLESTEROL				24) ALCOHOLISM	
10) HEART VALVE DISORDER				25) MENTAL ILLNESS	
11) LUNG DISEASE				26) DEPRESSION	
12) STOMACH ULCER				27) NUTRITION	
13) BOWEL PROBLEMS				28) IMMUNIZATIONS	
14) LIVER HEPATITIS					
15) KIDNEY/BLADDER					

CIG No Yes PKG/DAY _____ #YRS _____
 ALCOHOL No Yes DRINKS/WK _____
 COFFEE/TEA No Yes CUPS/DAY _____

STREET/ILLEGAL DRUGS No Yes

TYPE: _____

LIVING WILL _____ DPAHC _____

MEDICATION	DOSE	TIMES/ DAY	MEDICATION	DOSE	TIMES/ DAY
<i>Es droest</i>					

DRUG ALLERGIES/ALLERGIES:
SUBSTANCE

REACTION

DRUG ALLERGIES/ALLERGIES:
SUBSTANCE

REACTION

FOR
WOMEN
ONLY:DATE OF LAST
MENST. PERIOD: *years*

PREGNANCIES:

BIRTH CONTROL: YES NO TYPE: _____

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VITAL SIGNS:	PHYSICAL EXAM						
	HT	WT	BP SUPINE	BP SITTING	PULSE	RESP RATE	TEMP
							101.6

GENERAL APPEARANCE: quite ill appearing, flushed, restless, periorbital edema A&O x 3,

EXAMINATION:

1) HEAD/SCALP

NORM
 ABN
 NO EXAM

(Comment on Abnormal Findings)

2) EYES

fundi

injected bil. w. bil. yellow s/c → ex taken

3) EARS

4) NOSE/THROAT

Throat erythematous, dry MM, hemorrhagic bullae of buccal & labial mucosa - throat cx taken

5) NECK

a) THYROID

D. bil. ant. car. ly. ad. pathy

6) HEART

tachycardic, RR O/HGR

7) LUNGS

8) ABDOMEN

9) RECTAL

a) PROSTATE

10) EXTREMITIES

a) PULSES

11) NEUROLOGICAL

a) DTR

12) JOINTS

achy

13) GENITALIA

a few erythematous maculae 2 mm diam. on labia minora, MM benign, white s/c neg. for yeast, clue cells; vaginal painful on exam but no CMT or adrenal tenderness

14) BREASTS

widespread itchy maculopapular rash over trunk; papules 2-6 mm in diameter non confluent, sharply bordered, horizontal lie; no pustules; palms & soles spared

15) SKIN

TESTS: CBC w. diff - 7.200 WBC, no shift

CP - R 3.6, otherw. gr. nl

U/A - SG 1.025, otherw. nl

CXR - WNL

Vag. b/c - neg. yeast, clue. rich; scant diplococci; mod. gram pos. rods
(*Doderlein*)

Bld. cx - pdg.

Throat & conjunctival cx pdg.

Mono test neg.

ASSESSMENT: Febrile illness of unknown etiology - poss. viral (Coxsackie, Adeno)
vs. primary viral w. secondary bacterial infection; poss. allergic reaction to
del. consult w. 18 fellow BHC - suggests obs., bld. cx } unknown substance
(nasal congestion, itchy rash)

Pt. received 1/2 l. LR & 1000 mg ASAP in ER w. notable improvement
in subjective condition within short period of time; pt. able to converse, sit
up, became hungry; Benadryl working for itching

Admit to acute care - IVF, Abx empirically, fever & itch control

PLANS:

SIGNATURE

DATE